application or Docket Number

YOR 920010526451

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000									<i>'</i>				
CLAIMS AS FILED - PART (Column 1)					(Colu	mn 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			45				R/	ΤE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASI	BASIC FEE		OR	BASIC FEE	· 710.00	
TOTAL CHARGEABLE CLAIMS			45 minus 20=		• 25		X\$	X\$ 9=		OR	X\$18=	450	
INDEPENDENT CLAIMS			/3 minus 3 =		10		X4	l0=		OR	X80=	800	
MULTIPLE DEPENDENT CLAIM PRESENT							+1	35=		OR	+270=		
* If the difference in column 1 is less than zero, enter					r "0" in c	column 2	ТО	TAL		OR	TOTAL	1960	
	C	LAIMS AS A (Column 1)	MENDED	(Colu	mn 2)	n 2) (Column 3)		SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
	Independent	dependent		T CL AINA	=	X4	-0=		OR	X80=	,		
	PIRST PRESENTATION OF MOLTIFLE DEPENDENT				CLAN		+13	35=		OR	+270=		
								OTAL . FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)			mn 2)	(Column 3)							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
AME	Independent	*	Minus	***	F CL AIM	-	X4	0=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								35=		OR	+270=		
							ADDIT	OTAL . FEE		OR	TOTAL ADDIT. FEE		
		1											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***		-	X4	0=		OR	X80=		
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	'ENDEN	I CLAIM		+13	35=		OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"											TOTAL		
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 8/00)